

State of New Hampshire Department of Safety

Department of Safety Division of Motor Vehicles Stephen E. Merrill Building 23 Hazen Drive, Concord, NH 03305 TDD Access: Relay NH 1-800-735-2964



TEMPORARILY AWAY

Name: (please print):				
	First	Middle		Last
New Hampshire Address:	G,	City/Tow		7: 1
Date of Birth:	Street	ew Hampshire Dri		Zip code
Date of Dirtin.		cw Hampsiii e Dii	ver Electise Nur	mber
If you are applying for, or hav	e previously ap	oplied for, a New Har	npshire driver lice	nse, identification card, title or registration
and you will be temporarily av	way for attenda	nce at a learning inst	itution, winter resi	dence or other reasons, please complete
this form so that your license,	identification o	eard, title or registrati	on can be mailed t	to you at your temporary residence.
I will be leaving the State of	f New Hamps	shire on:		
I will be returning to New l	Hampshire on	:		
I will be out of New Hamps	hire during th	ne above time for th	e following reaso	on: please check one
I attend college	e out of state.			
I reside in anot	her state duri	ng the winter montl	1 S.	
Other. Please		_		
omer. Trease	state the reast			
Please mail my driver lice	ense identifica	tion card, title or re	gistration to my	out of state address below:
Street	City or To	own	State	Zip Code
If we should need to contact your file:	t you, would	you please provide	the following cor	ntact information that may be added to
Best contact telephone n	umber: () -		<u> </u>
Other contact telephone r	number: () -		
Other contact telephone r	number: () -		<u></u>
May we leave a message	if necessary?	Yes	☐ No	
Email address (optional):				<u> </u>
Signature: Signed under penalty of unsworn falsification pursuant to RSA 641:3.				Date:
Signed under penalty	of unsworn falsifica	tion pursuant to RSA 641:3.		
FOR DMV USE ONLY: I	ssue Date:			